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APPLICANTS

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None Ns

** CONTINUING DATA *****

None Ns

** FOREIGN APPLICATIONS *****

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 135	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature	<i>Reed</i>	<i>RLS</i>			

ADDRESS

23696
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TITLE

APPARATUS AND METHOD FOR DISTRIBUTION OF HIGH QUALITY IMAGE AND AUDIO PROGRAMS
 TO REMOTE LOCATIONS

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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